



CP 2171

+

PTO/SB/21 (modified)

Approved for use through xx/xx/xx, OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence during pendency of filed application)	0001/PTO Rev. 10/95	U.S. Department of Commerce Patent and Trademark Office	Application Number	10/021,752
			Filing Date	October 29, 2001
			First Named Inventor	James P. Lester et al.
			Confirmation No.	6272
			Group Art Unit Number	2171
			Examiner Name	Not yet known
Total Number of Pages in This Submission		5**	Attorney Docket Number	21685-06159

RECEIVED

MAR 05 2002

**ENCLOSURES (check all that apply)**

- |   |   |
|---|---|
| <input type="checkbox"/> Fee Transmittal Form (in duplicate)<br><input type="checkbox"/> Check Enclosed | <input type="checkbox"/> Issue Fee Transmittal  |
| <input checked="" type="checkbox"/> Return Receipt Postcard   | <input type="checkbox"/> Letter to Chief Draftsperson   |
| <input type="checkbox"/> Response to Notice to File Missing Parts                                       | <input type="checkbox"/> Formal Drawing(s):<br>[ ] Sheet(s) of Figure(s) [ ]                  |
| <input type="checkbox"/> Copy of Notice to File Missing Parts   | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences           |
| <input type="checkbox"/> Declaration  | <input type="checkbox"/> Appeal Communication to Group<br>(Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> Power of Attorney  | <input type="checkbox"/> Certified Copy of Priority Document(s)                               |
| <input checked="" type="checkbox"/> Information Disclosure Statement & PTO-1449                         | <input type="checkbox"/> After Allowance Communication to Group                               |
| <input checked="" type="checkbox"/> Copies of 15 IDS Cited References                                   | <input type="checkbox"/>  |
| <input type="checkbox"/> Request for Corrected Filing Receipt   | <input type="checkbox"/>  |
| <input type="checkbox"/> Application Data Sheet   | <input type="checkbox"/>  |
| <input type="checkbox"/> Amendment/Response: [ ] Page(s)  | <input type="checkbox"/>  |
| <input type="checkbox"/> After Final  | <input type="checkbox"/>  |
| <input type="checkbox"/> Status Request   | <input type="checkbox"/>  |
| <input type="checkbox"/> Revocation and Power of Attorney   | <input type="checkbox"/>  |

Technology Center 2100

**REMARKS:** \*\* IDS references are not counted in total pages submitted**SIGNATURE OF ATTORNEY OR AGENT**

Signature:			
Attorney/Reg. No.:	Robert A. Hulse, Reg. No. 48,473	Dated:	2/13/02

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence, including the enclosures identified above, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: BOX NON-FEE AMENDMENT, Commissioner for Patents, Washington, D.C. 20231 on the date shown below

Signature:			
Typed or Printed Name:	Robert A. Hulse	Dated:	2/13/02

21685/06159/SF/5068633.1